

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
09774650
APPLICANT(S)

FILING DATE
02-06-01

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
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TOTAL IND.	5					
TOTAL DEP.	5	←	←	←		
TOTAL CLAIMS	15					

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
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TOTAL IND.				←				
TOTAL DEP.				←	←			
TOTAL CLAIMS				←				